

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|----------------------------------|-----------|--------|---------------------|
| FEE DETERMINATION | | | 6/28 |
| O.I.P.E. CLASSIFIER | <i>Bm</i> | 32 | 06-09-01 |
| FORMALITY REVIEW | <i>SP</i> | 111 | 8/8/01 |
| RESPONSE FORMALITY REVIEW | <i>HA</i> | 858 | 01/10/02 |

INDEX OF CLAIMS

| | | | | | |
|---|----------------------|------------|-------|--------------|----------|
| ✓ | Rejected | N | | Non-elected | |
| = | Allowed | I | | Interference | |
| — | (Through numeral)... | Canceled | A | | Appeal |
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| Claim | Date |
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| Claim | Date |
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| Final | Original |
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If more than 150 claims or 10 actions
staple additional sheet here